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#### CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

# STATEMENT OF ECONOMIC INTERESTS FAIR POLITICAL PRACOVERS PAGE IISSION

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Date Received MAR 1/4/2019

CITY OF BERKELEY CITY CLERK DEPARTMENT

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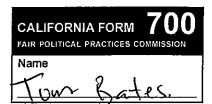
☐ State ☐ Judge (Statewide Jurisdiction)   ☐ Multi-County ☐ County of   ☐ City of ☐ Other    3. Type of Statement (Check at least one box)  Annual: The period covered is January 1, 2010, through December 31, 2010or- The period covered is/, through December 31, 2010. The period covered is January 1, 2010, through the date of leaving office.  ☐ Assuming Office: Date/, through December 31, 2010, through the date of leaving office.  ☐ Candidate: Election Year Office sought, if different than Part 1:	
Agency Name  Divisin, Board, Department, District, if applicable Your Position  If fing for multiple positions, list below or on an attachment.  Agency: SEE ATTACHED Position:  2. Jurisdiction of Office (Check at least one box)  State	_
Division, Board, Department, District, if applicable  If filing for multiple positions, list below or on an attachment.  Agency: SEE ATTACHED  Position:  2. Jurisdiction of Office (Check at least one box)  State  Judge (Statewide Jurisdiction)  County of  Other  3. Type of Statement (Check at least one box)  Aanual: The period covered is January 1, 2010, through December 31, (Check one)  The period covered is, through December 31, or 1 period covered is January 1, 2010, through December 31, or 1 period covered is January 1, 2010, through December 31, or 1 period covered is January 1, 2010, through December 31, or 1 period covered is January 1, 2010, through the date of leaving office.  Assuming Office: Date, through December 31, or 1 period covered is, through the date of leaving office.  Candidate: Election Year  Office sought, if different than Part 1:  4. Schedule Summary  Check applicable schedules or "None."  Schedule A1 Investments — schedule attached  Schedule D - Income — Gifts — schedule attached  Schedule B - Real Property — schedule attached  Schedule B - Real Property — schedule attached  Schedule E - Income — Gifts — Travel Payments — schedule attached	
➤ If filing for multiple positions, list below or on an attachment.  Agency: SEE ATTACHED Position:  2. Jurisdiction of Office (Check at least one box)  State Judge (Statewide Jurisdiction)  Other  3. Type of Statement (Check at least one box)  Annual: The period covered is January 1, 2010, through December 31, 2010or-  The period covered is//, through December 31, 2010. The period covered is January 1, 2010, through the date of leaving office.  Assuming Office: Date/_/, through December 31, 2010. The period covered is/_/, through the date of leaving office.  Assuming Office: Date/_/, through December 31, 2010. The period covered is/_/, through the date of leaving office.  The period covered is/_/, through the date of leaving office.  The period covered is/_/, through the date of leaving office.  The period covered is/_/, through the date of leaving office.  The period covered is/_/, through the date of leaving office.  The period covered is/_/, through the date of leaving office.  The period covered is/_/, through the date of leaving office.  The period covered is/_/, through the date of leaving office.  The period covered is/_/, through the date of leaving office.  The period covered is/_/, through the date of leaving office.  The period covered is/_/, through the date of leaving office.  The period covered is/_/, through the date of leaving office.  The period covered is/_/, through the date of leaving office.  The period covered is/_/, through the date of leaving office.  The period covered is/_/, through the date of leaving office.  The period covered is/_/, through the date of leaving office.  The period covered is/_/, through the date of leaving office.  The period covered is/_/, through the date of leaving office.  The period covered is///, through the date of leaving office.  The period covered is///, through the date of leaving office.  The period covered is///, through the date of leaving office.  The period covered is _	
Position:  Agency: SEE ATTACHED Position:  2. Jurisdiction of Office (Check at least one box)  State	-
Agency: SEE ATTACHED Position:  2. Jurisdiction of Office (Check at least one box)  State Judge (Statewide Jurisdiction)  County of Other  3. Type of Statement (Check at least one box)  Annual: The period covered is January 1, 2010, through December 31, 2010.  The period covered is/, through December 31, 2010.  Assuming Office: Date/, through December 31, 2010.  The period covered is/, through the date of leaving office.  The period covered is/, through the date of leaving office.  The period covered is/, through the date of leaving office.  The period covered is/, through the date of leaving office.  The period covered is/, through the date of leaving office.  The period covered is/, through the date of leaving office.  The period covered is/, through the date of leaving office.  The period covered is/, through the date of leaving office.  The period covered is/, through the date of leaving office.  The period covered is/, through the date of leaving office.  The period covered is/, through the date of leaving office.  The period covered is/, through the date of leaving office.  The period covered is/, through the date of leaving office.  The period covered is/, through the date of leaving office.  The period covered is/, through the date of leaving office.  Schedule C - Income, Loans, & Business Positions - schedule attached  Schedule D - Income - Gifts - Travel Payments - schedule attached  Schedule B - Real Property - schedule attached  Schedule B - Real Property - schedule attached  Schedule B - Income - Gifts - Travel Payments - schedule attached	
2. Jurisdiction of Office (Check at least one box)  State  Multi-County  City of  City of  Annual: The period covered is January 1, 2010, through December 31, (Check one)  The period covered is//, through December 31, The period covered is January 1, 2010, through December 31, (Check one)  The period covered is/_/, through December 31, The period covered is January 1, 2010, through the date of leaving office.  Assuming Office: Date/_/, through December 31, The period covered is January 1, 2010, through the date of leaving office.  The period covered is/_/, through the date	•
Multi-County   County of	
Multi-County   County of	-
City of   Other	
3. Type of Statement (Check at least one box)  Annual: The period covered is January 1, 2010, through December 31,	
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of leaving office.  ☐ Candidate: Election Year Office sought, if different than Part 1:	
4. Schedule Summary  Check applicable schedules or "None."  □ Schedule A-1 - Investments - schedule attached □ Schedule A-2 - Investments - schedule attached □ Schedule B - Real Property - schedule attached □ Schedule B - Real Property - schedule attached	
Check applicable schedules or "None."  □ Schedule A-1 - Investments - schedule attached □ Schedule A-2 - Investments - schedule attached □ Schedule B - Real Property - schedule attached □ Schedule B - Real Property - schedule attached	
☐ Schedule A-1 - Investments - schedule attached       ☐ Schedule C - Income, Loans, & Business Positions - schedule attached         ☐ Schedule A-2 - Investments - schedule attached       ☐ Schedule D - Income - Gifts - schedule attached         ☐ Schedule B - Real Property - schedule attached       ☐ Schedule E - Income - Gifts - Travel Payments - schedule attached	-
□ Schedule A-2 - Investments - schedule attached       □ Schedule D - Income - Gifts - schedule attached         □ Schedule B - Real Property - schedule attached       □ Schedule E - Income - Gifts - Travel Payments - schedule attached	
☐ Schedule B - Real Property – schedule attached ☐ Schedule E - Income – Gifts – Travel Payments – schedule attached	
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None - No reportable interests on any schedule	
	F
herein and in any attached schedules is true and complete. I acknowledge this is a	
1 certify under penalty of perjury under the laws of the State of California that	
1000000 7 7 7 7 1	
Date Signed MARCH 7, 2011 Signatur	

## SCHEDULE C Income, Loans, & Business Positions (Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name Tom Zatas

► 1. INCOME RECEIVED	► 1. INCOME RECEIVED		
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME		
ILONA H. HANCOCK			
ADDRESS (Business Address Acceptable) 44705	ADDRESS (Business Address Acceptable)		
2225 WARD ST. BERKELEY CA BUSINESS ACTIVITY, IF ANY, OF SOURCE			
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE		
LEGIS LATOR			
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION		
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED		
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000		
☐ \$10,001 - \$100,000 X OVER \$100,000	☐ \$10,001 - \$100,000 ☐ OVER \$100,000		
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED		
Salary Spouse's or registered domestic partner's income	Salary Spouse's or registered domestic partner's income		
Loan repayment Partnership	Loan repayment Partnership		
Sale of(Property, car, boat, etc.)	Sale of(Property, car, boat, etc.)		
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more		
Other(Describe)	Other(Describe)		
(Describe)	(Describe)		
2 LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERI	CD.		
➤ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERI	-		
* You are not required to report loans from commercial	lending institutions, or any indebtedness created as part		
* You are not required to report loans from commercial of a retail installment or credit card transaction, made	lending institutions, or any indebtedness created as part in the lender's regular course of business on terms		
* You are not required to report loans from commercial of a retail installment or credit card transaction, made	lending institutions, or any indebtedness created as part in the lender's regular course of business on terms our official status. Personal loans and loans received		
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# SCHEDULE D Income - Gifts



NAME OF SOURCE  FUNDS USEN SERVICED NECESTRATION ADDRESS (Business Address Acceptable)  NOMPROFIT FOUNDATION DATE (mindedyn) VALUE  NOMPROFIT FOUNDATION DATE (mindedyn) VALUE  NAME OF SOURCE  NOMPROFIT FOUNDATION DATE (mindedyn) VALUE  SECRIPTION OF GIFT(S)  NAME OF SOURCE  DATE (mindedyn) VALUE  DESCRIPTION OF GIFT(S)  NAME OF SOURCE  DATE (mindedyn) VALUE  DESCRIPTION OF GIFT(S)  NAME OF SOURCE  NAME OF SOURCE  DATE (mindedyn) VALUE  DESCRIPTION OF GIFT(S)  NAME OF SOURCE  DATE (mindedyn) VALUE  DESCRIPTION OF GIFT(S)  NAME OF SOURCE  DATE (mindedyn) VALUE  DESCRIPTION OF GIFT(S)  NAME OF SOURCE  DATE (mindedyn) VALUE  DESCRIPTION OF GIFT(S)  NAME OF SOURCE  DATE (mindedyn) VALUE  DESCRIPTION OF GIFT(S)  NAME OF SOURCE  DATE (mindedyn) VALUE  DESCRIPTION OF GIFT(S)  NAME OF SOURCE  DATE (mindedyn) VALUE  DESCRIPTION OF GIFT(S)  NAME OF SOURCE  DATE (mindedyn) VALUE  DESCRIPTION OF GIFT(S)  NAME OF SOURCE  DATE (mindedyn) VALUE  DESCRIPTION OF GIFT(S)  NAME OF SOURCE  DATE (mindedyn) VALUE  DESCRIPTION OF GIFT(S)  NAME OF SOURCE  DATE (mindedyn) VALUE  DESCRIPTION OF GIFT(S)  NAME OF SOURCE  DATE (mindedyn) VALUE  DESCRIPTION OF GIFT(S)  NAME OF SOURCE  DATE (mindedyn) VALUE  DESCRIPTION OF GIFT(S)  NAME OF SOURCE  DATE (mindedyn) VALUE  DESCRIPTION OF GIFT(S)  NAME OF SOURCE  DATE (mindedyn) VALUE  DESCRIPTION OF GIFT(S)  NAME OF SOURCE  DATE (mindedyn) VALUE  DESCRIPTION OF GIFT(S)  NAME OF SOURCE				
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# California Form 700 Statement of Economic Interest Thomas H. Bates

### Attached Sheet

#### **Bay Conservation and Development Commission**

Position: Commissioner

Address: 50 California Street, Suite 2600 San Francisco, CA 94111

#### **Metropolitan Transportation Commission**

Position: Commissioner

Address: 101 Eighth Street Oakland, CA 94607

#### **Bay Area Air Quality Management District**

Position: Director

Address: 939 Ellis Street San Francisco, CA 94109

#### Berkeley Redevelopment Agency

Position: President

#### Alameda County Congestion Management

Position: Alternate

Address: 1330 Broadway Avenue Suite 220 Oakland, CA 94612

#### **Joint Powers Financing Authority**

Position: Director

#### **AC Transit BRT Policy Steering Committee**

Position: Commissioner

Address: 1600 Franklin St. Oakland, CA 94612

#### City of Berkeley

Position: Mayor

Address: 2180 Milvia Street Berkeley, CA 94704